2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

3/27/2008-90038-034-$61.25-$61.25

DOCUMENT # N07000002243

1. Entity Name
ST. JOHN'S PROFESSIONAL CENTRE CONDOMINIUM ASSOCIATION, INC.

FILED
08 MAY 15 PM 4:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
11215 ST. JOHNS INDUSTRIAL PKWY. JACKSONVILLE, FL 32246	11215 ST. JOHNS INDUSTRIAL PKWY. JACKSONVILLE, FL 32246

02182008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PATTERSON, ANDERSON & FELDMAN, P.A. 3010 SOUTH 3RD ST. JACKSONVILLE, FL 32250	Name ROBERT MORVILLO Street Address (P.O. Box Number is Not Acceptable) 10104 EAGLES NEST DR City JUPITER FL Zip Code 33458

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSTV MORVILLO, ROBERT G 11215 ST. JOHNS INDUSTRIAL PKWY. JACKSONVILLE, FL 32246	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MORVILLO, ROBERT G 11215 ST. JOHNS INDUSTRIAL PKWY. JACKSONVILLE, FL 32246	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MORVILLO, GERALD G 11215 ST. JOHNS INDUSTRIAL PKWY. JACKSONVILLE, FL 32246	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MORVILLO, CHARLES 11215 ST. JOHNS INDUSTRIAL PKWY. JACKSONVILLE, FL 32246	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date